

Please print:

Complete Address

sign and date below.

Office (list District number if applicable)

What is your occupation/profession?

Full Name

## **Conflict of Interest**

## ELECTED OFFICIAL

## **Statement of Financial Interest**

RECEIVED
JAN 0 8 2019
S.D. SEC. OF STATE

Last updated 12/20/2017

Deadline to file: Not more than 15 days after the person assumes office.

NO Changes

File with: The SECRETARY OF STATE (State Capitol, 2<sup>nd</sup> floor).

<u>Elected Officials who file:</u> State Office elected officials (governor, lieutenant governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands, state legislator, circuit court judge and supreme court justice <u>SDCL 3-1A-2</u>);

Gubernatorial Appointee for whom senate confirmation is required shall file with the secretary of state a statement of financial interest before confirmation <u>SDCL 3-1A-3</u>.

Local Office officials (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1<sup>st</sup> class municipality <u>SDCL 3-1A-4</u>)

\*\*If there are no changes from your previously filed CANDIDATE Financial Interest Statement check the box and

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List any source of funds (business or economic relationship) which contributes more than 10% of or more than \$2,000 to your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. This also includes any enterprise in which you or an immediate family member(s) controls more than 10% of the capital or stock. Identify who receives the income from each enterprise but do not include the value. (SDCL 3-1A-1)  *The intent of this form is to collect specific information, not generalities.		
Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)
		Filed thisday of
		SECRETARY OF STATE
I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year.  (Signature)  (Date)		

SOUTH DAKOTA SECRETARY OF STATE • ATTENTION ELECTIONS • 500 E. Capitol Ave. • Pierre, SD 57501

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